



REGIONAL PARTNERSHIP GRANTS

GRANT PERIOD: 2017–2022

PRESERVING FAMILIES THROUGH PARTNERSHIP

LEAD AGENCY: Preferred Family Healthcare, LOCATION:

Inc.

TARGET SERVICE AREA: Greene, Barry, Lawrence, Stone, Christian, and Taney

Counties

LOCATION: Springfield, MO

ADMINISTRATION FOR CHILDREN AND

FAMILIES REGION: 7

CONGRESSIONAL DISTRICT SERVED: MO-007

BRIEF PROGRAM DESCRIPTION

PROGRAM DESCRIPTION: Preserving Families Through Partnerships (RPG-PFTP) builds on Preferred Family Healthcare's Round 2 Regional Partnership Grant, the Strengths, Needs, Abilities, and Preferences (SNAP) project. This RPG-PFTP program uses a trauma-informed, responsive, evidence-based, family, and community-centered process to preserve families and enhance family and child well-being. RPG-PFTP enhances the community's collaborative capacity to improve recovery from substance use disorder (SUD), and family safety and stability, thus promoting long-term family and child well-being.

RPG-PFTP uses the Signs of Safety program, an integrated best practice framework for child intervention services currently utilized by Missouri Children's Division. This framework is the foundation for RPG-PFTP's family assessment and service plan and melds effectively with Preferred Family Healthcare's trauma-informed, recovery-oriented, strengths-based model of service delivery.

RPG-PFTP is aligned with Preferred Family Healthcare's mission of providing integrated care for the purpose of achieving overall health and wellness.

TARGET POPULATION: Preserving Families Through Partnerships' target population is families with children (birth to age 18) who are at risk of or in out-of-home care due to substance use by their parent(s)/caretaker(s). The population is further defined as families with parental SUD issues and an active Children's Division child abuse/neglect referral or open case. Ten percent of referrals are set aside for primary prevention referrals from community partners, where a child abuse/neglect referral has not yet been made.

PROJECTED NUMBERS SERVED: Preserving Families Through Partnerships will serve, at a minimum, 288 families and their children over the course of the 5-year project (36 families in years one and five, and 72 families in years two, three, and four).

MAJOR PROGRAM GOALS

- **Goal 1:** Enhance substance use/co-occurring disorder recovery by integrating and coordinating treatment as a core component of child welfare services.
- Goal 2: Enhance family and child safety with coordination of care across multiple settings.
- Goal 3: Improve family and child permanency with coordination of care across multiple settings.
- Goal 4: Enhance family and child well-being with coordination of care across multiple settings.

KEY PROGRAM SERVICES

- Children's Treatment Services (grant staff provided screening, assessment, mental health counseling, trauma services)
- Cognitive Behavioral Therapy
- Eye Movement Desensitization and Reprocessing
- Family-Centered SUD Treatment
- Family Counseling
- Helping Women Recover/Helping Men Recover
- Individual Placement and Support (supported employment)
- Living in Balance
- Medication-Assisted Treatment

- Motivational Interviewing
- Nurturing Program for Parents in Substance Use Treatment and Recovery
- Parent and Child Interactive Therapy
- Parent-Child Assistance (a wraparound in-home comprehensive service program)
- Peer Recovery Mentors
- Primary and Basic Behavioral Health Care
- SUD Treatment for Adults (screening, assessment, outpatient treatment)
- Trauma-Focused Cognitive Behavioral Therapy
- Twelve Step Facilitation Therapy

PARTNER AGENCIES AND ORGANIZATIONS

- Missouri Children's Division
- Missouri Department of Mental Health
- Community Partnership of the Ozarks
- Harmony House Domestic Violence Services
- Simmering Center: SUD Sober Housing Services
- Springfield Partners Foster Care Case Management Services
- Southwest Coalition Foster Care Case Management Service
- Greene County Health Department
- Barry County Health Department
- The Missouri Alliance for Children and Families
- Great Circle
- 31st Circuit: Juvenile Court, Drug Treatment Courts, Fostering Court Improvement Project

- 39th Circuit: Juvenile Courts, Drug Treatment Courts
- 38th Circuit Juvenile Court
- Clark Center CCBHC
- Jordan Valley Community Health Center
- Cox Medical Services
- Mercy Medical Services
- Ozark Community Hospital
- Missouri Hospital Association
- Midwest Assessment & Psychotherapy Services (MAPS)
- Community Partnership of the Ozarks
- Isabel's House Crisis Nursery
- The Doula Foundation
- Jesus Was Homeless
- PEEPS in Recovery

EVALUATION DESIGN

The local evaluation of the Preserving Families Through Partnership (PFTP) program includes an impact study and a process and collaboration study. The grantee is also participating in the RPG cross-site evaluation studies of family and child outcomes, program implementation, and collaboration among RPG grantees and partners.

IMPACT AND OUTCOME STUDY DESIGN

The grantee uses a randomized controlled trial to examine the impact of its RPG services. All participants in the evaluation receive the same set of core services: trauma-informed enhanced case management from grant staff; a peer recovery mentor services; in-home treatment of substance use disorders as needed (offered only in rural areas); the Nurturing Program for Parents in Substance Abuse Treatment and Recovery; and primary and basic behavioral health care. One-third of the families in the evaluation receive only these core services. Another one-third of the families receive Living in Balance (LIB) from their family advocate in addition to the core services. The final one-third of the families receive Helping Men Recover/Helping Women Recover (HWR/HMR) from their family advocate in addition to the core services. The impact study compares outcomes of these three groups. PFTP expects services to last about 12 to 18 months for all three groups. The impact study includes 288 families, with 96 in each of the three groups. The grantee is examining impacts in the following domains: permanency, safety, child well-being, and recovery.

Data sources include administrative data and information collected by data collectors using standardized instruments. Frontline program staff administer two of the standardized instruments (the Addiction Severity Index and the Post-Traumatic Stress Diagnostic Scale). Evaluation staff administer the other standardized instruments. Data is collected four times for each family: (1) at intake (baseline); (2) six months after baseline; (3) at the end of services; and (4) six months after the end of services.

PROCESS AND COLLABORATION STUDY DESIGN

In the process study, PFTP examines implementation and progress to support program success and longer-term outcomes. The process study takes into consideration fidelity to the program model; family, referral source, and advocate perceptions of their experiences in the program; implementation elements that can be scaled or reproduced, human capital requirements, and successes and challenges. Data sources include program documentation, case records, interviews with staff and families, focus groups with participants, and administrative data. As part of the process study, the grantee explores whether effective and efficient collaborative relationships in regional partnerships are associated with family preservation.

SUSTAINABILITY STRATEGIES AND ACTIVITIES

Preferred Family Healthcare works to sustain the RPG-PFTP through a system of care improvements and policy development. RPG-PFTP has developed a dissemination plan, designed to provide information about project activities and outcomes to ensure that identified stakeholders (including, but not limited to, project staff, referral partners, treatment partners, community stakeholders, and local, state, and federal legislative officials) gain an awareness and understanding of the RPG-PFTP project. Additionally, through rigorous, ongoing evaluation, RPG-PFTP project staff informs and educates the service community and stakeholders on the effectiveness of program activities and other best practices in achieving improved outcomes for children and families and improving service collaboration for the target population. By sharing program outcome results with state mental health and child welfare leaders, Preferred Family Health informs and improves the field of practice and hopes to gain financial support for sustaining and expanding the program in future years. Possibilities include a set aside of funding through Missouri's state appropriations process and exploring Medicaid as a potential source of funding.

Preferred Family Healthcare works to implement and sustain successful components of the RPG-PFTP project agency-wide, including:

- Maintaining relationships with RPG-PFTP community partners, offering a comprehensive wraparound approach to all Preferred Family Healthcare clients
- Working with staff to become certified as trainers for evidence-based practices utilized in RPG-PFTP
- Continuing to collaborate with Stakeholder Advisory Board members, to encourage future collaborations and sharing of project outcomes.

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